GUIDE TO THE REQUIREMENTS OF THE IDAHO CHILD CARE IMMUNIZATION LAW FOR

Child Care Providers

REFERENCE	Section 39-1118, Idaho Code: Idaho Department of Health and Welfare Rules, IDAPA 16, Title 02, Chapter 11 "Immunization Requirements for Children Attending Licensed Day Care Facilities in Idaho."											
WHY CHILDREN NEED SHOTS	The Idaho Child Care Immunization Law requires that children be up-to-date on their immunizations to attend child care. Diseases like measles and whooping cough spread quickly, so children need to be protected before they enter. Most children need booster shots before starting kindergarten.											
INSTRUCTIONS	Parents must present their child's Immunization Record within fourteen (14) days of a child's initial attendance. Child care providers should copy the full date (MM/DD/YYYY) of each shot onto the Idaho Child Care Health Form and then determine if the child is up to date. Health Forms are available through the Idaho Immunization Program. As the child care provider, it is your responsibility to follow-up regularly until all required shots have been received.											
	To attend a licensed child care facility a child must be age appropriately vaccinated with 5 doses of DTaP, 3 doses of Polio, 2 doses of MMR, 3 doses of Hib, and 3 doses of Hepatitis B as is age appropriate according to the ACIP Recommended Schedule (see the Recommended Schedule). It is recommended that a child receive necessary vaccine doses at the earliest ACIP recommended age. The deadline for compliance with Idaho's Child Care Immunization Law is demonstrated by the table below. If a child does not obtain the required number of vaccine doses by the time they turn the age noted as the "age deadline" then that child is to be excluded from child care.											
IDAHO IMMUNIZATION	Age Deadline To Obtain Required		All d	Doses (Shots) Required According Idaho Law All doses must meet the minimum age and interval DTaP Polio MMR Hib Hepatitis B					вВ	Recommended Varicella Hepatitis		
	Doses								'			
REQUIREMENTS	3 months 5 months		1		2			2	1 2			
	7 months		3						2			
	16 months		 `			1		3			1	1
	19 months		4	1	3	3		3				
	2 years											2
	7 years		Ę		4*	2					2	
	Note: Chickenpox (Varicella), Hepatitis A, Pneumococcal, and Rotavirus vaccination are recommended for children. Adolescents 11- 18 are recommended to be vaccinated with a booster dose of Tdap, Meningococcal, and Human Papillomavirus (HPV). To protect students and prevent outbreaks child care providers should promote these additional vaccines. *Only 3 doses of Polio are required, 4 doses are recommended by ACIP.											
Recommended Immunization Schedule for Persons Aged 0–6 Years—UNITED STATES • 2007												
Vaccine▼ Age ►	Birth	1 month	2 months		6 months	12 months	15 montl	18 ns months	19–23 months	2–3 years	4–6 years	
Hepatitis B¹	НерВ	HepB HepB see footnote1 HepB HepB		epB Ser	ies							
Rotavirus ²			Rota	Rota	Rota							Range of recommended
Diphtheria, Tetanus, Pertussis³			DTaP	DTaP	DTaP			DTaP///	8		DTaP	ages
Haemophilus influenzae type b ⁴			Hib	Hib	Hib⁴	/////H	ib////	//	Hib			
Pneumococcal⁵			PCV	PCV	PCV	////P	(V///			PC'	PV	Catch-up immunization

EXEMPTIONS

Inactivated Poliovirus

Measles, Mumps, Rubella⁷

Influenza⁶

Varicella⁸ Hepatitis A⁹

Meningococcal¹⁰

Idaho law allows a parent/guardian to claim exemption from immunization requirements for their child based on religious or personal beliefs. A medical exemption can be granted to those children who have a physician documented medical condition preventing them from receiving required vaccinations. For children with an exemption, a signed state of Idaho exemption form or physician letter must be on file with the child care facility. (Section 39-4802, Idaho Code)

MMR

Influenza (Yearly)

HepA (2 doses)

Certain high-risk groups

HepA Series
MPSV4

for Persons Aged 4 Months-18 Years Who Start Late or Who Are More Than 1 Month Behind

The table below provides catch-up schedules and minimum intervals between doses for children whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Use the section appropriate for the child's age.

		CATCH-UP SCHEDULE FOR PER	SONS AGED 4 MONTHS-6 YEARS							
Vaccine	Minimum Age	Minimum Interval Between Doses								
vaccille	for Dose 1	Dose 1 to Dose 2	Dose 2 to Dose 3	Dose 3 to Dose 4	Dose 4 to Dose 5					
Hepatitis B¹	Birth	4 weeks	8 weeks (and 16 weeks after first dose)							
Rotavirus²	6 wks	4 weeks	4 weeks							
Diphtheria,Tetanus, Pertussis³	6 wks	4 weeks	4 weeks	6 months	6 months ³					
Haemophilus influenzae type b ⁴	6 wks	4 weeks if first dose administered at age <12 months 8 weeks (as final dose) if first dose administered at age 12-14 months No further doses needed if first dose administered at age ≥15 months	4 weeks⁴ if current age <12 months 8 weeks (as final dose)⁴ if current age ≥12 months and second dose administered at age <15 months No further doses needed if previous dose administered at age ≥15 months	8 weeks (as final dose) This dose only necessary for children aged 12 months-5 years who received 3 doses before age 12 months						
Pneumococcal ⁵	6 wks	4 weeks if first dose administered at age <12 months and current age <24 months 8 weeks (as final dose) if first dose administered at age ≥12 months or current age 24–59 months No further doses needed for healthy children if first dose administered at age ≥24 months	4 weeks if current age <12 months 8 weeks (as final dose) if current age ≥12 months No further doses needed for healthy children if previous dose administered at age ≥24 months	8 weeks (as final dose) This dose only necessary for children aged 12 months-5 years who received 3 doses before age 12 months						
Inactivated Poliovirus	6 wks	4 weeks	4 weeks	4 weeks ⁶	••••••••••••••••••••••••••					
Measles, Mumps, Rubella ⁷	12 mos	4 weeks	***************************************	***************************************	***** ****** **************************					
Varicella¹	12 mos	3 months		***************************************						
Hepatitis A ^a	12 mos	6 months								
		CATCH-UP SCHEDULE FOR	PERSONS AGED 7-18 YEARS							
Tetanus, Diphtheria/ Tetanus, Diphtheria, Pertussis''	7 yrs¹º	4 weeks	8 weeks if first dose administered at age <12 months 6 months if first dose administered at age ≥ 12 months	6 months if first dose administered at age <12 months						
Human Papillomavirus ¹¹	9 yrs	4 weeks	12 weeks							
Hepatitis A ⁹	12 mos	6 months								
Hepatitis B¹	Birth	4 weeks	8 weeks (and 16 weeks after first dose)							
Inactivated Poliovirus	6 wks	4 weeks	4 weeks	4 weeks ⁶						
Measles, Mumps, Rubella ⁷	12 mos	4 weeks								
Varicella ^ı	12 mos	4 weeks if first dose administered at age ≥13 years 3 months if first dose administered at age <13 years								

- 1. Hepatitis B vaccine (HepB). (Minimum age: birth)
 - Administer the 3-dose series to those who were not previously vaccinated.
 - A 2-dose series of Recombivax HB* is licensed for children aged 11–15 years.
- 2. Rotavirus vaccine (Rota). (Minimum age: 6 weeks)
 - . Do not start the series later than age 12 weeks.
 - Administer the final dose in the series by age 32 weeks. Do not administer a dose later than age 32 weeks.
 - Data on safety and efficacy outside of these age ranges are insufficient.
- Diphtheria and tetanus toxoids and acellular pertussis vaccine (DTaP). (Minimum age: 6 weeks)
 - The fifth dose is not necessary if the fourth dose was administered at age ≥4 years.
 - DTaP is not indicated for persons aged ≥7 years.
- 4. Haemophilus influenzae type b conjugate vaccine (Hib). (Minimum age: 6 weeks)
 - Vaccine is not generally recommended for children aged ≥5 years.
 - If current age < 12 months and the first 2 doses were PRP-OMP (PedvaxHIB® or ComVax* [Merck]), the third (and final) dose should be administered at age 12–15 months and at least 8 weeks after the second dose.
 - If first dose was administered at age 7–11 months, administer 2 doses separated by 4 weeks plus a booster at age 12–15 months.
- 5. Pneumococcal conjugate vaccine (PCV). (Minimum age: 6 weeks)
 - Vaccine is not generally recommended for children aged ≥5 years.
- 6. Inactivated poliovirus vaccine (IPV). (Minimum age: 6 weeks)
 - For children who received an all-IPV or all-oral poliovirus (OPV) series, a fourth dose is not necessary if third dose was administered at age ≥ 4 years.
 - If both OPV and IPV were administered as part of a series, a total of 4 doses should be administered, regardless of the child's current age.

- 7. Measles, mumps, and rubella vaccine (MMR). (Minimum age: 12 months)
 - The second dose of MMR is recommended routinely at age 4–6 years but may be administered earlier if desired.
 - If not previously vaccinated, administer 2 doses of MMR during any visit with ≥4 weeks between the doses.
- 8. Varicella vaccine. (Minimum age: 12 months)
 - The second dose of varicella vaccine is recommended routinely at age 4-6 years but may be administered earlier if desired.
 - Do not repeat the second dose in persons aged < 13 years if administered ≥ 28 days after the first dose.
- 9. Hepatitis A vaccine (HepA). (Minimum age: 12 months)
 - HepA is recommended for certain groups of children, including in areas where vaccination programs target older children. See MMWR 2006;55(No. RR-7):1–23.
- Tetanus and diphtheria toxoids vaccine (Td) and tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap). (Minimum ages: 7 years for Td, 10 years for BOOSTRIX*, and 11 years for ADACEL***)
 - Tdap should be substituted for a single dose of Td in the primary catch-up series or as a booster if age appropriate; use Td for other doses.
 - A 5-year interval from the last Td dose is encouraged when Tdap is used as a booster dose. A booster (fourth) dose is needed if any of the previous doses were administered at age <12 months. Refer to ACIP recommendations for further information. See MMWR 2006;55(No. RR-3).
- 11. Human papillomavirus vaccine (HPV). (Minimum age: 9 years)
- Administer the HPV vaccine series to females at age 13–18 years if not previously vaccinated.